

# NOTE: THIS IS JUST A SAMPLE, YOU ARE FILLING FOR NAV MED WEST.

## **FY12 NROWS APPLICATION GUIDE FOR Navy Medicine East**

### **Step 1 of 7: Personnel and Contact Information**

#### **1. Personnel and Contact Information**

Is the member's email address valid? **Yes** or **No**

Does Sailor wish to supply a new Permanent Mailing Address (PMA) and phone number? **YES** or **NO** as applicable

How does the Sailor wish to receive the orders? **Mail-Out** or **Web** as applicable

\* Does Sailor wish to supply an alternate delivery address and phone number for paper airline tickets?

**YES** or **NO** as applicable

### **SAVE then Next**

### **Step 2 of 7: Duty Period Information**

#### **2. Duty Period Information**

##### **Purpose of Duty**

\* Type of Duty Requested:

Select **Active Duty for Training** (ADT) or **Annual Training** as applicable

\* Duty Sub Type:

If you selected ADT the Sub Type is **ADT Special**

If you selected Annual Training the Sub Type is **Annual Training**

These orders are

Billet Control Number (BCN)

**Reporting** is the only option you should select. No one should select report by letter only. You should have your BCN before you submit your NROWS orders. If you do not have a BCN then stop this process right now and contact your DET TO for guidance. If you have followed the AT or ADT submission process then you have already submitted an application to the Command you plan to support. **The OSO staff for the hospital will issue your BCN number after credentialing status is confirmed and all other required clearances and arrangements with site you will support.** If you submit these orders without a BCN they will be disapproved. **A BCN is required.**

**E-Mail Notification Addresses** (Please use a semicolon [;] in between each e-mail address)

**Enter your current email address(es) here**, e.g. home email, work email, etc.

**Operational Support Reporting| [Lookup](#) Click the lookup link and select the following from the drop down menus for each of the items below:**

**PROFESSIONAL CONFERENCE-MEDICAL (i.e., AMSUS):**

OPERATIONS/EXERCISES/EVENTS: OpERATIONAL TRAINING SUPPORT FOR GAINING  
COMMAND

MISSION PRIORITY: E6-MEDICAL PROFESSIONAL DEVELOPMENT

XCOM PILLAR/COMMAND SUPPORTED: EXCOM BUMED

ENTERPRISE SUPPORTED: BUREAU OF MEDICINE AND SURGERY

PURPOSE CATEGORY: INDIVIDUAL/UNIT-LEVEL READINESS TRAINING  
REQUIREMENT STATUS: NOT APPLICABLE

**PROFESSIONAL TRAINING-MEDICAL (i.e., TCCC):**

OPERATIONS/EXERCISES/EVENTS: OPERATIONAL TRAINING SUPPORT FOR GAINING  
COMMAND  
MISSION PRIORITY: E6-MEDICAL PROFESSIONAL DEVELOPMENT  
XCOM PILLAR/COMMAND SUPPORTED: EXCOM BUMED  
ENTERPRISE SUPPORTED: BUREAU OF MEDICINE AND SURGERY  
PURPOSE CATEGORY: INDIVIDUAL/UNIT-LEVEL READINESS TRAINING  
REQUIREMENT STATUS: NOT APPLICABLE

**PRE-DEPLOYMENT TRAINING WHEN MEMBER HAS BEEN TAPPED FOR MOBILIZATION (use  
with caution):**

OPERATIONS/EXERCISES/EVENTS: OPERATIONAL TRAINING SUPPORT FOR GAINING  
COMMAND  
MISSION PRIORITY: A2-PRE-DEPLOYMENT FLEET READINESS TRAINING PLAN ISO OCO  
XCOM PILLAR/COMMAND SUPPORTED: EXCOM BUMED  
ENTERPRISE SUPPORTED: BUREAU OF MEDICINE AND SURGERY  
PURPOSE CATEGORY: INDIVIDUAL/UNIT-LEVEL READINESS TRAINING  
REQUIREMENT STATUS: NOT APPLICABLE

**PROFESSIONAL TRAINING-NON-MEDICAL (i.e., security training)**

OPERATIONS/EXERCISES/EVENTS: OPERATIONAL TRAINING SUPPORT FOR GAINING  
COMMAND  
MISSION PRIORITY: E3-INDIVIDUAL TRAINING TO INCREASE UNIT READINESS  
XCOM PILLAR/COMMAND SUPPORTED: EXCOM BUMED  
ENTERPRISE SUPPORTED: BUREAU OF MEDICINE AND SURGERY  
PURPOSE CATEGORY: INDIVIDUAL/UNIT-LEVEL READINESS TRAINING  
REQUIREMENT STATUS: NOT APPLICABLE

**CLINICAL SUSTAINMENT:**

OPERATIONS/EXERCISES/EVENTS: OPERATIONAL TRAINING SUPPORT FOR GAINING  
COMMAND  
MISSION PRIORITY: A6-MEDICAL DEPARTMENT COMPLETING ANNUAL CLINICAL  
SUSTAINMENT MINIMUMS  
XCOM PILLAR/COMMAND SUPPORTED: EXCOM BUMED  
ENTERPRISE SUPPORTED: BUREAU OF MEDICINE AND SURGERY  
PURPOSE CATEGORY: INDIVIDUAL/UNIT-LEVEL READINESS TRAINING  
REQUIREMENT STATUS: NOT APPLICABLE

**ECOMS/ECONS/TCAB:**

OPERATIONS/EXERCISES/EVENTS: OPERATIONAL TRAINING SUPPORT FOR GAINING  
COMMAND

MISSION PRIORITY: D3-SPECIAL PROJECT THAT REQUIRES UNIQUE NR SKILL SET  
XCOM PILLAR/COMMAND SUPPORTED: EXCOM BUMED  
ENTERPRISE SUPPORTED: BUREAU OF MEDICINE AND SURGERY  
PURPOSE CATEGORY: OPERATIONAL SUPPORT  
REQUIREMENT STATUS: NOT APPLICABLE

**ANNUAL TRAINING AT GAINING COMMAND:**

OPERATIONS/EXERCISES/EVENTS: OPERATIONAL TRAINING SUPPORT FOR GAINING  
COMMAND  
MISSION PRIORITY: E3-INDIVIDUAL TRAINING TO INCREASE UNIT READINESS  
XCOM PILLAR/COMMAND SUPPORTED: EXCOM BUMED  
ENTERPRISE SUPPORTED: BUREAU OF MEDICINE AND SURGERY  
PURPOSE CATEGORY: INDIVIDUAL/UNIT-LEVEL READINESS TRAINING  
REQUIREMENT STATUS: NOT APPLICABLE

**MTF BACKFILL SUPPORT (not AT):**

OPERATIONS/EXERCISES/EVENTS: OPERATIONAL TRAINING SUPPORT FOR GAINING  
COMMAND  
MISSION PRIORITY: E5-ALL OTHER SUPPORT NOT WITHIN A HIGHER PRIORITY  
CATEGORY  
XCOM PILLAR/COMMAND SUPPORTED: EXCOM BUMED  
ENTERPRISE SUPPORTED: BUREAU OF MEDICINE AND SURGERY  
PURPOSE CATEGORY: INDIVIDUAL/UNIT-LEVEL READINESS TRAINING  
REQUIREMENT STATUS: NOT APPLICABLE

**HA/DR RESPONSE (i.e., HAITI - use only when authorized)**

OPERATIONS/EXERCISES/EVENTS: OPERATIONAL TRAINING SUPPORT FOR GAINING  
COMMAND  
MISSION PRIORITY: A1-CRISIS RESPONSE  
XCOM PILLAR/COMMAND SUPPORTED: EXCOM BUMED  
ENTERPRISE SUPPORTED: BUREAU OF MEDICINE AND SURGERY  
PURPOSE CATEGORY: OPERATIONAL SUPPORT  
REQUIREMENT STATUS: NOT APPLICABLE

**Security Clearance**

Is Security Clearance Required? **Yes**

All members should already have an up to date Security Clearance or Background Investigation per SECNAV 5510.3. If you do not have a current clearance then contact the Security Manager at the NOSC. If you do not have a current Security Clearance or Background Investigation computer access at the Command will be denied.

Type of Clearance Required: **Secret**

Justification for Security: **Adjudicated NACLC Investigation**

**SAVE then Next**

### Step 3 of 7: Duty Locations and Travel

#### 3. **Duty Locations and Travel**

NOTE: Report date cannot start on a weekend or holiday. Orders should begin and end so that member can provide the maximum support for the command.

##### **Location Information**

\* Travel Start Date

**LOCAL Members- travel and report date are the same**

**CONUS-Travel is 1 day before report date**

**OCONUS- Travel 2 days before report date**

\* Initial Report Date/Time

**0730 at the latest**

\* End Date for this Location

**This is the last day you will be working at the Command. NOTE: You CANNOT check out on a weekend.**

UIC: 68908

\* Unit Name: Navy Medicine East

\* Street Address: 620 John Paul Jones Circle

\* City: Portsmouth

\* State/Province: VA

\* Country: USA

\* Zip Code: 23703

\* For Duty With: Department where you will be working

##### **Point of Contact Information**

Point of Contact: HMC Dianna Fricke, LCPO

Phone: 757-953-7645

Fax: 757-953-7433

Email: Dianna.fricke@med.navy.mil

##### **ITEMPO Information**

\* Is this the Sailor's Permanent Training Site (PTS)?

**Yes or No as applicable**

\* Is this within 100 miles or 3 hours driving time of Sailor's permanent civilian residence?

**Yes or No as applicable**

\* ITEMPO Category

**Individual Training**

**Note: this won't display if you answer Yes above.**

\* ITEMPO Purpose

**Unknown**

**Note: this won't display if you answer Yes above.**

##### **For Duty Afloat? No**

\* Ship Name

\* Dates Aboard Ship

\* Embark City/State Lookup

\* Debark City/State

### Per diem & Travel Information

- \* Is this within the corporate city limits of Sailor's residence?
- \* Is this within commuting distance from Sailor's residence?
- \* Does Sailor wish to commute vice billeting?
- \* Field Duty Dates

**YES or No depending on your home location status**

**No** Note: this won't display if you answer Yes above.

**No** Note: this won't display if you answer Yes above.

**Not Applicable** Note: this won't display if you answer Yes above.

At this point, you can [Fill out Travel to this Location](#)

#### Travel Options

- \* Mode of Transportation **Typically you will select personal car or commercial air**

#### Preferred Arrangements

- \* Desired Departure Date **Conus= 1 day prior to report date for non local members, Local members enter the start date of your AT; OCONUS= 2 days prior to report date**  
**Select times that will permit you to arrive by 7:30AM on report date.**

No Earlier Than Time

No Later Than Time

- \* Departure Airport | [Lookup](#)

**Airport closest to your home of record.**

- \* Arrival Airport | [Lookup](#)

**Norfolk International (ORF)**

Departure Airport Justification

**Select airport closest to home or as determined by DTS.**

Arrival Airport Justification

**Select airport closest to reporting site or as determined by DTS.**

Special Instructions to Travel

At this point, you can [Fill out Per Diem at this Location](#)

#### Per Diem Location Select State & City

- \* Per Diem Location | **Virginia, Portsmouth**

#### Rental Car Information

- \* Is a rental car required? **Select yes as appropriate**

#### Quarters and Messing

- \* Quarters **Available**
- \* BQ Location **Navy Gateway Inn (Norfolk Naval Shipyard-Scott Annex)**
- \* Messing **Proportional Meal Rate**

At this point you can, [Fill out travel for the last leg](#)

#### Travel Options

- \* Mode of Transportation **Transportation home should mirror transportation to training site, personal car or commercial air plane.**

#### Preferred Arrangements

- \* Desired Departure Date **Date is last day of ADT or AT orders.**  
**1600 on date of last class**

No Earlier Than Time

No Later Than Time

\* Departure Airport | [Lookup](#)

\* Arrival Airport | [Lookup](#)

Departure Airport Justification

Arrival Airport Justification

Special Instructions to Travel

**Norfolk International (ORF)**

**Should be the same as the departure airport**

**Should be closest to reporting site or determined by DTS.**

**Airport closest to home of record.**

### **SAVE then Next**

### **Step 4 of 7: Tour and Pay Entitlements**

#### **4. Tour and Pay Entitlements**

\* Choose the appropriate Government Travel Charge Card (GTCC) justification: | [Lookup](#) Click the lookup link and select

**either: Member has government travel charge card; OR**

**Personnel determined to be infrequent traveler.**

\* Confirm Member Page 2 has been verified by checking box

**Yes**

\* IF ELIGIBLE would the member prefer to receive Lump Sum Leave for days accrued for the order?

**Yes**

\* Will there be any conference fees associated with this set of orders?

**No**

If conference fees apply, will an SF 1164 be submitted for reimbursement?

**No**

If an SF 1164 will NOT be submitted, please enter Conference Appropriation

If an SF 1164 will NOT be submitted, please enter Conference SDN

Enter passport number if member has an Official Passport

Enter passport number if member has a Tourist Passport

Has Anti-Terrorism/Force Protection (AT/FP) Training and Certification been completed?

**YES If not completed, orders will be disapproved.**

Has variation of itinerary been authorized?

**No**

Has dual lodging been authorized?

**No**

Has in and around mileage been authorized?

**No**

Has mixed mode of travel been authorized?

**No**

Has official long distance phone calls been authorized?

**No**

If excess baggage has been authorized, enter number of pieces allowed

Has the member been authorized to carry firearms?

**No**

Will the member be performing duty in a combat zone?

**No**

Select any entitlements that are authorized for the Reservist for this period of duty | [Lookup](#)

### **SAVE then Next**

### **Step 5 of 7: Paragraph Selection**

**5. Paragraph Selection** USE FOR SPECIFIC INFORMATION NOT COVERED IN OTHER AREAS. (Can put in special justification information—must “Save” before continuing or information will be lost)

[Go to Non-Standard Paragraphs](#)

[Add Paragraphs](#)

**SAVE then Next**

**Step 6 of 7: Funding Information**

**6. Funding Information**

Were manual orders generated?

**No**

Enter the Travel Order Number (TON), if manual orders were generated

**(not applicable)**

Fiscal Year: **2012**

Will travel and/or per diem be paid with 'Other Appropriation'?

**No**

Command: **For AT the funding command will be automatically populated (NOSC and RCC).**

**For Active Duty for Training (ADT) the Command is EXCOM Bureau of Medicine and Surgery**

Funding Source: **For ADT you select BUMED ADT Special | BUMED FM**

**SAVE then Next**

**Step 7 of 7: Justification**

**7. Justification**

General Comments	
Justification for Hard Holds (only for ADT exceeding the limit)	

Do you anticipate this order being a back to back order

**No or Yes**

For this request, travel arrangements will route to the Defense Travel System (DTS): **No or Yes**—member should select Yes unless their NOSC has not instituted DTS.

For this request, travel authorizations within DTS will be filled out by:

**Member**

- It is important to click "Save" after completing each section of your Initial Application. If you accidentally close out of your web browser or in the event of a power outage that causes your computer to shut off, all information entered in your application will be lost if it was not saved. By clicking "Save", all information will be saved online and none of it will be lost in the event of a power outage on your computer, etc.

**Members must save and route orders for them to be processed.**

**Every SELRES member is responsible for tracking their own orders through the NROWS system and printing approved orders before traveling to the supported command. Members can track the status of their orders by logging into NROWS.**

## How to check the Status of your NROWS Orders.

**Log into NROWS and go to Sailor menu.**

**Click My Inbox.**

**Use drop down menu and look in “applications in Progress” or “approved orders”.**

**Click on blue tracking number hyperlink.**

**Below is the screen view you should see that provides the current tacking status of your orders.**

Control Tracking #:N/A  
Tracking #: 1234567/0  
SSN: xxx-xx-xxxx  
Travel System: SATO

Name: ENS XXXXX  
Start Date:2010/09/19  
End Date: 2010/09/24

Order Type:ADT  
Status: INITIAL  
Total Days: 6

[View Application Details](#)

Display Section:

Routed To	Action Type	Action Date/Time	Last Name	Work Center
Unit Approval				(OHSU unit approver)
NRA Orders Request				(NOSC)
NRA Hard Holds				(NOSC)
NRA Security Clearance				(NOSC)
School				
Headquarters Waivers				(N31-N33)
Travel Arrangements				(SATO or DTS)
Travel Estimates				(SATO or DTS)
Travel Verification (Before F.A.)				(SATO or DTS)
Fund Approval				(NOSC or BUMED)
Authentication				
Travel Verification				(SATO or DTS)
Awaiting Ticketing				(SATO or DTS)
Travel Cancellations				
Travel Special Action				
Verify Travel Cancellation				

**For Assistance: NROWS HELP DESK 1-866-830-6466**  
**DTS HELP DESK 1-888-HELP1GO**